MICHIGAN DEPARTMENT OF STATE



Lansing, Michigan 48918-0001

APPLICATION TO PROVIDE INTERPRETER SERVICES

The Department of State reserves the right to approve or deny this application or to remove your name from the active interpreter list at any time. As a condition of approval, a Department of State representative may, at any time, record a test(s) you give to determine your suitability to interpret in the language.

Personal Data						
Full Name	First	Middle	Last		Date of Birth	
Address of Residency					City	
Zip Code		Home Phone			Business Phone	
Michigan Driver License or Personal Identification Number						
Reference Information						
Current Employer						
Address				City		
Zip Code		Supervisor Name			Phone Number	
Are you affiliated with an organization which provides interpreter services to clients or the general public:						
Yes No Organization Name Contact Phone No						
Do you regularly interpret for courts, administrative hearings, other legal entities or service organizations? If yes, please list courts on separate sheet.						
Yes No						
For which language(s) are you able to provide interpreter services?						
What general area or Secretary of State office(s) are you willing to			ou willing to	cover?	What time of day are you available?	
On what type of basis are you interested in providing your service as an interpreter?						
Permanent (subject to renewal every two years)				One Time (single applicant only)		
CERTIFICATION			Mail completed form to:			
My signature certifies that I request to serve as a volunteer interpreter for the administration of driver license tests for the Michigan Department of State. All information provided on this application is true to the best of my knowledge. I will not charge money or accept other compensation for providing this service. I further agree I will not coach or otherwise assist the driver license applicant on correct responses to driver license test questions.			Michigan Department of State Metro Enforcement Division 26000 W. 8 Mile Road Southfield, MI 48034-5916			
			ponses to	All applications for permanent interpreter must be submitted with:		
Signature of Applicant			 A photocopy of valid driver license or personal identification card. Two written (legible) letters of recommendation. 			
Date			3. A police clearance letter from local police.			

VOLUNTEER INTERPRETER PROGRAM CERTIFICATION FORM

CERTII ICATION I ORW
If approved, I, (name of applicant) agree to become an interpreter for the Michigan Department of State. I understand that the following guidelines will apply to my service.
This is a volunteer program.
 I will not charge money or accept other compensation for providing this service.
 A Department of State representative may, at any time, record a test I give to determine my suitability to interpret in the language.
I will be available at the times specified in my application.
 When interpretation is performed, I will not coach or otherwise assist the driver license applicant on correct responses to driver license test questions.
I will ONLY read the questions as written for the driver license test.
 If any complaints are received by the Department of State from citizens or from branch office personnel, an investigation of the allegations may be conducted.
 Multiple complaints may be grounds for removal even if wrongdoing is not established.
I UNDERSTAND THE ABOVE CONDITIONS AND AGREE TO BECOME A VOLUNTEER FOR THE ADMINISTRATION OF DRIVER LICENSE TESTS FOR THE MICHIGAN DEPARTMENT OF STATE INTERPRETER PROGRAM.
SIGNATURE: DATE:
NAME:
PHONE NUMBER: DATE OF BIRTH:
ADDRESS:

DRIVER LICENSE NUMBER: _____

LANGUAGES: _____